

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF MICHIGAN  
SOUTHERN DIVISION

*In re* FTCA Flint Water Cases

Civil No. 4:17-cv-11218  
(Consolidated)

Linda V. Parker  
United States District Judge

Curtis Ivy, Jr.  
United States Magistrate Judge

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This Order Relates to:

ALL CASES

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**PROTOCOL FOR  
RULE 35 DEFENDANT MEDICAL EXAMINATIONS**

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Case Management Order (“CMO”) No. 4 requires that a separate protocol be submitted to the Court for approval prior to any Federal Rule of Civil Procedure (“Rule”) 35 Defendant Medical Examinations (“DME”). ECF No. 172, § II(8). The United States submitted a motion for Rule 35 examinations to be conducted in accordance with its proposed medical examination protocol (ECF No. 206), Plaintiffs submitted a Response (ECF No. 209), and the United States submitted a Reply (ECF No. 210). The Court heard argument on the motion on March 2, 2023,

and on March 6, 2023, issued an Order granting the motion in part. ECF No. 212. This protocol for Rule 35 DMEs has been modified to align with the Court's Order. Accordingly, the following protocol for Rule 35 DMEs shall apply to all neuropsychological defense medical examinations conducted for the *In re* FTCA Flint Water Cases bellwether cases:

1. The United States has retained Dr. Jennifer L. Huffman, a licensed psychologist, to perform neuropsychological examinations ("Rule 35 DMEs") of both adult and child bellwether plaintiffs.
2. Unless otherwise instructed, Rule 35 DMEs will take place at Dr. Huffman's office at 4572 Hagadorn Road, Suite 2G, East Lansing, Michigan 48823, office phone number (517) 337-9554.
3. A current curriculum vitae for Dr. Huffman is attached as Exhibit A.
4. In accordance with Rule 35, examinations will not be conducted unless the examinee's mental or physical condition is in controversy. At this time, the parties agree that the mental and physical condition of the five minor FTCA Discovery Group plaintiffs is in controversy and that neuropsychological examinations shall be conducted on those five plaintiffs. If the United States seeks to have neuropsychological examinations of any of the adult FTCA Discovery Group plaintiffs done, the government shall notify FTCA Plaintiffs Liaison Counsel in writing. If FTCA Plaintiffs Liaison Counsel contests the

need for a neuropsychological examination, the parties shall meet and confer promptly. If the parties cannot agree on the appropriateness of conducting a Rule 35 DME then the United States shall notify the Court and request a hearing. At least ten business days prior to the hearing, the United States shall file a memorandum of no more than 10 pages stating its position, and three business days later Plaintiffs shall file their opposition memorandum of no more than 10 pages.

5. In light of the ongoing COVID pandemic, upon request Dr. Huffman and her staff are willing to wear masks and utilize a separation screen between the examinee and the examiner. The doctor and her staff are up-to-date on Covid vaccinations and will remain so if CDC recommendations change.

6. Both adult and child examinees (and any adult that will accompany a child to the examination) must report any symptoms of illness 24 hours in advance of their appointment. Dr. Huffman must do the same with respect to herself and any staff that will be present on the day of appointment.

7. A list itemizing the tests that Dr. Huffman might administer during examinations shall be provided to FTCA Plaintiffs Liaison Counsel no later than 21 days before the first examination. This list shall not be considered exhaustive.

8. ADULT RULE 35 DME PROCEDURES: The neuropsychological examination of adults whose mental condition is in controversy consists of an interview and testing consistent with the patient guide issued by the Public Interest Advisory Committee, Division 40 (Clinical Neuropsychology), American Psychological Association, attached as Exhibit B (“APA patient guide”). If possible, examinations will be conducted in one day. Unless otherwise agreed to by the parties, examinations will be conducted from 8:15am-11:30am, then a 1-hour break, followed by a 12:30pm-5:00pm session, maximum. The morning and afternoon sessions will include 10-15 minute breaks, as needed. During this time, the examinee will be seen alone in the examination room with the examiner.

9. CHILD RULE 35 DME PROCEDURES: The neuropsychological examination of children whose mental condition is in controversy consists of observation of and interview with the child and testing consistent with the parent guide issued by the Public Interest Advisory Committee, Division 40 (Clinical Neuropsychology), American Psychological Association, attached as Exhibit C (“APA parent guide”). Examinations will be conducted in one day, although some children may require an additional examination appointment if they cannot complete the full examination day. In no case shall the examination exceed eight hours in total or more than two examination days unless Plaintiffs

agree or the Court so orders. Unless otherwise agreed to by the parties, examinations will be conducted from 8:15am-11:30am, then a 1-hour break, followed by a 12:30pm-5:00pm session, maximum. The morning and afternoon sessions will include 10-15 minute breaks, as needed. During this time, the child/examinee will be seen alone in the examination room with the examiner. No parent, guardian, or attorney will be allowed in the examination room during the testing procedures.

10. Should issues arise prior to or the morning of an examination that could impact the start time, attorneys for both sides and Dr. Huffman should communicate and come to an agreement regarding the examination schedule. If no agreement can be reached, the parties are directed to contact the chambers of Magistrate Judge Curtis Ivey, Jr., for a telephonic conference.

11. Each adult examinee and a parent/guardian of each child examinee should complete an adult or child history form, which should be provided to Dr. Huffman prior to the scheduled DME appointment. The adult history form is attached as Exhibit D; the child history form is attached as Exhibit E.

12. The parent/guardian of the child examinee will also be asked to complete various behavioral rating scales to assess symptoms on the testing day, as explained in the APA parent guide. These behavioral rating scales are

copyrighted materials and constitute raw test data, and shall be treated and protected as set forth in paragraph 12, *infra*.

13. The examiner's report required by Rule 35(b) will be provided to FTCA Plaintiffs Liaison Counsel within 30 days after each examination. The examiner's report must be in writing and must set out in detail the examiner's findings, including diagnoses, conclusions, and the results of any tests. Fed. R. Civ. P. 35(b)(2). Within 10 days after the disclosure of the examiner's report(s) by the United States, FTCA Plaintiffs Liaison Counsel shall provide to the United States like reports of all earlier or later examinations of the same or similar condition unless FTCA Plaintiffs Liaison Counsel show, in writing, good cause as to why such report(s) could not be obtained by them. Fed. R. Civ. P. 35(b)(3).

14. The raw scores and testing documents from the Rule 35 DMEs will only be provided to a licensed psychologist of FTCA Plaintiffs Liaison Counsel's choosing and shall be treated as confidential information in accordance with the Stipulated Protective Order [ECF No. 121]. Such information shall not be copied or used for any purpose other than the matter at hand and shall be destroyed at the close of the matter. Likewise, FTCA Plaintiffs Liaison Counsel shall provide, or arrange for the provision, to Dr. Huffman of copies of test protocols, raw scores and testing documents

related to all earlier or later examinations of plaintiffs of the same or similar condition.

**IT IS SO ORDERED.**

Dated: March 16, 2023

s/Curtis Ivy, Jr.  
Curtis Ivy, Jr.  
United States Magistrate Judge

## Exhibit A



**Jennifer L. Huffman**

jlhuffman@hpsych.com

4572 Hagadorn Road, Suite 2G, East Lansing, Michigan 48823

work (517) 337-9554 mobile (517) 937-5783

**PERSONAL**

Birth date: March 19, 1972

Family status: Married, two daughters, one son

**LICENSE/CERTIFICATIONS**

09/18/14 Subspecialty Certification in Pediatric Clinical Neuropsychology through ABPP, #7634

05/13/06 Diplomate, American Board of Professional Psychology-Clinical Neuropsychology, #6168

08/31/02 Full License granted by State of Michigan, #6301011260

**EDUCATION**

09/95-12/00 **Wayne State University, Detroit, Michigan**

Doctorate of Philosophy in Psychology, December 2000

Dissertation: "Predictors of Treatment Adherence and the Relationship Between Adherence and Treatment Outcome Among Migraine Headache Patients"

Master of Arts in Psychology, May 1997

Thesis: "Psychological Predictors of Cardiac Events"

Major area: Clinical Psychology; Minor area: Biopsychology

08/90-05/94 **Lake Superior State University, Sault Ste. Marie, Michigan**

Bachelor of Science, Summa Cum Laude, May 1994

Major: Psychology; Minor: Mathematics

**CLINICAL EXPERIENCE**

12/03-present **Neuropsychologist, Huffman Psychology, PLLC, East Lansing, Michigan**

Own and manage independent psychology practice aimed at providing neuropsychological assessments to individuals of all ages, with a particular emphasis on children. Serve a diverse population including children and adults with primary disorders of attention, autism spectrum disorders, intellectual disabilities, learning disorders, psychiatric problems, traumatic brain injuries, stroke, cancer, and dementia illnesses. Also provide psychological and educational intervention and consultation. Offer practicum training to local college students.

03/07-10/16 **Manager, Henry Ford Jackson Hospital Neuropsychology, Jackson, Michigan**

Managed department and conducted outpatient and inpatient neuropsychological assessments for a diverse population of children, adults, and elderly individuals diagnosed with a variety of conditions such as primary disorders of attention, autism spectrum disorders, intellectual disabilities, learning disorders, psychiatric problems, traumatic brain injuries, stroke, cancer, and dementia illnesses as a medical staff member. Testified in probate court related to issues of capacity to make medical decisions and need for guardianship/conservatorship. Supervised undergraduate and graduate students in administration and interpretation of a variety of neuropsychological measures. Involved in hospital staff/graduate medical education and performance improvement projects. Regularly participated in educational offerings such as trauma lectures, journal clubs, and neuroradiology case conferences.

04/03-02/07 **Staff Neuropsychologist, Henry Ford Jackson Hospital Neuropsychology, Jackson, Michigan**

Conducted outpatient and inpatient neuropsychological assessments for a diverse population of children, adults, and elderly individuals diagnosed with a variety of conditions such as primary disorders of attention, autism spectrum disorders, intellectual disabilities, learning disorders,

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psychiatric problems, traumatic brain injuries, stroke, brain tumors, and dementia illnesses as a medical staff member. Testified in probate court related to issues of capacity to make medical decisions and need for guardianship/conservatorship. Supervised undergraduate and graduate students in administration and interpretation of a variety of neuropsychological measures. Involved in hospital staff and psychology graduate education.

- 01/03-05/04 **Psychologist, University Center for the Child and Family, Ann Arbor, Michigan**  
Performed intellectual assessments for children being considered for placement in an educational program for gifted students.
- 02/02-12/03 **Associate, Center for Neuropsychology and Learning, Roger E. Lauer, Ph.D. & Associates, Ann Arbor, Michigan**  
Conducted neuropsychological assessments for children, adolescents, and adults with learning, attention, and developmental disorders to understand learning style and maximize performance in school and work settings. Also provided consultation to families and schools regarding appropriate interventions to maximize learning as well as psychotherapy.
- 10/02-04/03 **Staff Neuropsychologist, Michigan Medicine, Ann Arbor, Michigan**  
Performed neuropsychological assessments and provided supervision for a variety of child cases to other trainees. Specialized in neuropsychological evaluations of children who are cochlear implant candidates as well as conducted collaborative research with the Cochlear Implant Team.
- 10/01-11/03 **Neuropsychology Assistant, NeuroBehavioral Resources, Ann Arbor, Michigan**  
Provided record reviewing and technical assistance to neuropsychologist, Stanley Berent, Ph.D., and neurologist, Jim Albers, M.D., for complex legal cases typically involving exposure to neurotoxic substances.
- 09/00-10/02 **Post Doctoral Fellow, Michigan Medicine, Ann Arbor, Michigan**  
Neuropsychology Division Supervisor: Linas A. Bieliauskas, Ph.D., ABPP/CN  
Primary Supervisor: Bruno Giordani, Ph.D.  
Hours: 4000  
  
Conducted psychological and neuropsychological assessments for patients across the life span, with a particular emphasis on children. Assessments were performed primarily in an outpatient psychiatric center, although inpatients were also referred for testing. Participated in team approach assessment for pervasive developmental delays, Asperger's Disorder, and consideration for cochlear implant. Also attended case conferences, didactics, seminars, and psychiatry, neurology, and bioethics grand rounds, as well as conducted research. Audited a graduate course in neuroanatomy.
- 09/99-08/00 **Psychology Intern, Ann Arbor VA Medical Center, Ann Arbor, Michigan**  
Clinical Director: Kenneth M. Adams, Ph.D., ABPP/CN  
Primary Supervisor: Linas A. Bieliauskas, Ph.D., ABPP/CN  
Hours: 2000  
  
Conducted psychological and neuropsychological assessments, report writing, psychotherapy, case conferences, interdisciplinary rounds presentations, and attending seminars. Special rotations in geriatric neuropsychology and multidisciplinary pain management involving assessment and treatment of patients suffering from chronic pain.

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**09/98-05/99 Clinic Therapist, Wayne State University, Detroit, Michigan**

Supervisors: Brian Lakey, Ph.D., Annmarie Cano, Ph.D.

Hours: 1000 (In combination with Graduate Teaching Assistant—See Teaching Experience)

Conducted individual therapy with adults from a variety of cultural backgrounds with presenting problems ranging from depression to eating disorders and relationship difficulties.

**09/97-08/98 Psychology Assistant, Henry Ford Jackson Hospital, Jackson, Michigan**

Supervisors: Jerel E. Del Dotto, Ph.D., ABPP/CN, John L. Fisk, Ph.D., ABPP/CN

Hours: 1000

Conducted psychological and neuropsychological assessments of inpatient and outpatient children, adults, and elderly adults with presenting problems that included primary disorders of attention, cognitive difficulties, learning disorders, dementia, and personality disorders. Responsible for interviewing, testing, report writing, and providing feedback to clients and/or their families.

**09/97-08/98 Therapy Practicum, Wayne State University, Detroit, Michigan**

Supervisors: Brian Lakey, Ph.D., Elizabeth DeRooy, Ph.D., R. Douglas Whitman, Ph.D.

Hours: 250

Performed therapy for adults with various presenting problems including depression, marital distress, anxiety, and social skills problems. Attended didactics on therapeutic techniques and presented case conferences.

**09/96-08/97 Psychology Assistant, Center for Forensic Psychiatry, Ann Arbor, Michigan**

Supervisor: Judith Thompson, Ph.D.

Hours: 1000

Administered and interpreted psychological tests of inpatients adjudicated *Not Guilty by Reason of Insanity* or *Incompetent to Stand Trial* to aid in treatment planning or decision-making processes. Also performed testing on the outpatient evaluation unit as needed and assisted with inpatient group therapy. Observed interviews of outpatients being evaluated for Competency or Criminal Responsibility. Accompanied psychologists to court when testifying regarding an evaluation. Attended weekly seminars on various topics related to psychology and law.

**09/97-08/96 Assessment Practicum, Wayne State University, Detroit, Michigan**

Supervisors: R. Douglas Whitman, Ph.D., Lisa Rapport, Ph.D., Rita Casey, Ph.D.

Hours: 250

Performed psychological assessment for adults and children with a variety of presenting problems including behavioral problems, primary disorders of attention, cognitive difficulties, and learning disorders. Also performed giftedness assessments. Attended weekly didactics on assessment techniques.

**01/93-12/93 Psychology Assistant, Eastern Upper Peninsula Community Mental Health Clinic, Sault Ste. Marie, Michigan**

Hours: 150

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Involved in data collection, assessment, planning, and implementation of behavior modification programs for a developmentally disabled population.

01/93-12/93 **Volunteer, Diane Pepler Domestic Violence Shelter, Sault Ste. Marie, Michigan**  
Hours: 75

Completed training program, Chippewa County, Spring 1993.

**TEACHING EXPERIENCE**

11/21 **Podcast Guest on Navigating Neuropsychology**

- Interviewed by John Bellone, Ph.D., ABPP/CN and Ryan Van Patten, Ph.D. on Intellectual Disability

<https://www.navneuro.com/86/>

01/04-present **Lecturer**

- Present lectures on a variety of topics including an all day training on understanding psychological and neuropsychological evaluations to rehabilitation counselors employed by Michigan Rehabilitation Services, intellectual disability across the lifespan for neuropsychology trainees, how to negotiate school services after a traumatic brain injury group for the Brain Injury Association of Michigan, discussion regarding cognitive impairment for a local Parkinson's disease support group, capacity evaluations for graduate medical students at Henry Ford Jackson Hospital, a middle childhood development lecture to Michigan State University Medical Students in a Human Behavior/Development course, an ethics lecture for a Michigan State University school psychology graduate students in an Ethics course, learning disorders lecture for Michigan State University school psychology graduate students in an Introduction to Neuropsychology course, a learning disorders lecture for Wayne State University clinical psychology graduate students in a Neuropsychological Assessment course. Conducted grand rounds presentation and subspecialty grand rounds for the Department of Pediatrics at Sparrow Hospital.

11/07-05/12 **Adjunct Professor, Department of Psychology, Michigan State University, East Lansing, Michigan**

- Provide clinical consultation and supervision to graduate students in the Clinical Psychology training program and undergraduate students.

09/03-12/12 **Practicum Supervisor**

- Served as supervisor for undergraduate students and graduate students attending Eastern Michigan University and Michigan State University who conducted neuropsychological assessments and wrote reports.

09/01-04/03 **Supervisor, Michigan Medicine, Ann Arbor, Michigan**

- Responsible for supervising interns and practicum students in neuropsychological assessment procedures and report writing skills.

05/99-08/99 **Adjunct Assistant Professor, Jackson Community College, Jackson, Michigan**

- Abnormal Psychology (Psychology 251)

09/98-09/99 **Graduate Teaching Assistant, Wayne State University, Detroit, Michigan**

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- Psychological Assessment I (Psychology 7200) Laboratory: Clinical Psychology doctoral training program. Topics covered included Clinical Interviews, WAIS-III, WISC-III.
- Psychological Assessment II (Psychology 7210) Laboratory: Clinical Psychology doctoral training program. Topics covered included DSM-IV, MMPI-2, Rorschach, and TAT.

05/97-08/97 **Teaching Assistant, Wayne State University, Detroit, Michigan**  
 • Human Sexuality (Psychology 3380)

05/96-08/97 **Teaching Assistant, Wayne State University, Detroit, Michigan**  
 • Introductory Psychology (Psychology 1010), 2 sections

09/92-05/94 **Teaching Assistant, Lake Superior State University, Sault Ste. Marie, Michigan**  
 • Introductory Psychology (Psychology 101): Supplemental instructor, 2 sections  
 • Learning and Motivation (Psychology 311): Supplemental instructor

09/91-05/94 **Tutor, Lake Superior State University, Sault Ste. Marie, Michigan**  
 • Psychology and mathematics courses

**RESEARCH EXPERIENCE**

08/04-09/04 **Neuropsychology Consultant for Grant #: 61-5944, East Lansing, Michigan**  
 Served as a consultant on research project examining the human health effects of PCB exposure from contaminated fish among adolescent Asian-Americans in the Fox River Basin. Provided consultation services regarding selection of neuropsychological tests along with their administration and interpretation.

10/02-04/03 **Staff Neuropsychologist, Michigan Medicine, Ann Arbor, Michigan**  
 Continued research developed as a post doctoral fellow examining attention skills in hearing-impaired children. Evaluated progress in children with pervasive developmental delays and hearing impairment pre- and post-cochlear implant.

09/00-10/02 **Post Doctoral Fellow, Michigan Medicine, Ann Arbor, Michigan**  
 Supervisor: Bruno Giordani, Ph.D.  
 Hours: 4000 (See Clinical Experience)

Involved in research examining the neuropsychological effects of gabapentin use for children with benign childhood epilepsy. Conducted a study to examine sleep-disordered breathing and school performance among African-American and non-African-American children. Involved in research examining neuropsychological test results among children who underwent adenotonsillectomy to treat sleep-disordered breathing. Examined attention skills in hearing-impaired children. Evaluated progress in children with pervasive developmental delays and hearing impairment pre- and post-cochlear implant.

01/98-08/00 **Dissertation, Wayne State University, Detroit, Michigan**  
 Defended, August 2000  
 Advisor: Mark A. Lumley, Ph.D.

Examined psychological predictors of adherence and the relationship between treatment adherence and outcome among migraine headache patients. Developed a standardized intake

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procedure for headache patients presenting to the neurology outpatient department at Henry Ford Hospital, Detroit, Michigan.

09/95-03/97 **Master's Thesis, Wayne State University, Detroit, Michigan**

Defended, March 1997

Advisor: Mark A. Lumley, Ph.D.

Conducted a follow-up study on psychological predictors of cardiac events at Henry Ford Hospital, Detroit, Michigan.

01/95-12/95 **Research Assistant, Wayne State University, Detroit, Michigan**

Advisor: Mark A. Lumley, Ph.D.

Examined psychological factors of low to intermediate risk patients who presented to Detroit Receiving Hospital's emergency room with chest pain.

09/93-05/94 **Senior Research Project, Lake Superior State University, Sault Ste. Marie, Michigan**

Major Professor: Timothy J. Sawyer, Ph.D.

Conducted an independent research project examining massed and spaced practice effects as a function of imagery level and background frequency.

## PRESENTATIONS

Huffman, J. L., Lee, H. J., Axelrod, B. N. (October, 2016). Predicting Wide Range Achievement Test Word Reading Score from Hopkins Adult Reading Test Scores. Poster presented at the 36<sup>th</sup> Annual Conference of the National Academy of Neuropsychology, Seattle, WA.

Huffman, J. L., Lee, H. J., Axelrod, B. N. (June, 2016). The Utility of the Hopkins Adult Reading Test in Premorbid Function Estimation: Comparison with the Wide Range Achievement Test. Poster presented at the 14<sup>th</sup> Annual Conference of the American Academy of Clinical Neuropsychology, Chicago, IL.

Freymuth, A., Giordani, B., Huffman, J. L., Laughrin, D., Sharma, U., Trudeau, V., Garofalo, E. A. (October, 2002). Neuropsychological performance associated with Gabapentin in children with benign epilepsy with centrotemporal spikes (BECTS). Poster presented at the 22<sup>nd</sup> Annual Conference of the National Academy of Neuropsychology, Miami, FL.

Huffman, J. L., Giordani, B., Layne, J. R., Ruzicka, D., Marriott, D. J., Weatherly, R. A., Dillon, J. E., and Chervin, R. D. (June, 2002). Academic achievement and attention in children scheduled for adenotonsillectomy in comparison to controls. Poster presented at the Associated Professional Sleep Societies Sixteenth Annual Meeting, Seattle, WA. Abstract published in Sleep, 25, A197-A198.

Chervin, R. D., Giordani, B., Ruzicka, D. L., Marriott, D. J., Weatherly, R. A., Marcus, C. L., Dillon, J. E., Huffman, J. L., Layne, J. R. (June, 2002). Polysomnographic findings and behavior in children scheduled for adenotonsillectomy or hernia repair. Poster presented at the Associated Professional Sleep Societies Sixteenth Annual Meeting, Seattle, WA. Abstract published in Sleep, 25, A431.



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Clarke, D. F., Huffman, J. L., Szymanski, E., Ruzicka, D., Miller, V., Nettles, A., Sowers, M.F., Giordani, B., and Chervin, R. D. (June, 2002). School performance, race, and symptoms of sleep-disordered breathing. Poster presented at the Associated Professional Sleep Societies Sixteenth Annual Meeting, Seattle, WA. Abstract published in Sleep, 25, A83-A84.

Huffman, J. L., Ketterer, M. W., Lumley, M. A., Aurora, S., Rapport, L. J., & Norris, L. (June, 2001). The relationship of headache attributions, medication adherence, and outcome among migraine headache patients. Poster presented at the Tenth Congress of the International Headache Society, New York, NY.

Huffman, J. L., Ketterer, M. W., Lumley, M. A., Aurora, S., Rapport, L. J., & Norris, L. (March, 2001). The relationship between self versus other reports of psychological distress and head pain among migraine headache patients. Citation poster presented at the Fifty-Ninth Annual Scientific Meeting of the American Psychosomatic Society, Monterey, CA. Abstract published in Psychosomatic Medicine, 63, 91.

Huffman, J. L., Lumley, M. A., Aurora, S., Rapport, L. J., Norris, L., & Ketterer, M. W. (March, 2000). The relationship of psychological factors, treatment adherence, and outcome among migraine headache patients. Poster presented at the Fifty-Eighth Annual Scientific Meeting of the American Psychosomatic Society, Savannah, GA. Abstract published in Psychosomatic Medicine, 62, 120.

Ketterer, M., Huffman, J., Lumley, M., Wassef, S., Kraft, P., Lovallo, W., & Goldberg, A. (March, 1997). Aggressively eschewing obfuscation: Does “denial” kill the cardiac patient? Poster presented at the Fifty-Fifth Annual Scientific Meeting of the American Psychosomatic Society, Santa Fe, NM. Abstract published in Psychosomatic Medicine, 59, 91.

Huffman, J. L. & Sawyer, T. J. (May, 1995). Spacing effects as a function of word imagery and background frequency. Poster presented at the Sixty-Seventh Annual Meeting of the Midwestern Psychological Association, Chicago, IL.

**PUBLICATIONS**

Huffman, J. L. (2020). Intellectual disability. In K. Stucky, M. W. Kirkwood, & J. Donders (Eds.), Clinical neuropsychology study guide and board review, second edition (pp. 231-242). New York, NY: Oxford University Press.

Huffman, J. L. (2013). Intellectual disability. In K. Stucky, M. W. Kirkwood, & J. Donders (Eds.), Clinical neuropsychology study guide and board review (pp. 174-183). New York, NY: Oxford University Press.

Giordani, B., Caveney, A. F., Laughrin, D., Huffman, J. L., Berent, S., Sharma, U., Giles, J., Garofalo, E. A. (2006). Cognitive and behavioral features of children with benign epilepsy with centrotemporal spikes (BECTS). Epilepsy Research, 70, 89-94.

Lumley, M. A., Radcliffe, A. M., Macklem, D., Mosley-Williams, A., Leissen, J. C., Huffman, J., D’Souza, P., Gillis, M., Meyer, T., Kraft, C., Rapport, L. (2005). Alexithymia and pain in three chronic pain samples: Comparing Caucasians and African Americans. Pain Medicine, 6, 251-261.

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Lumley, M. A., Huffman, J. L., Rapport, L. J., Aurora, S. K., Norris, L., & Ketterer, M. W. (2005). Do others really know us better? Predicting migraine activity from self- and other-ratings of negative affect. Journal of Psychosomatic Research, 58, 253-258.

Chervin, R. D Clarke, D. F., Huffman, J. L., Szymanski, E., Ruzicka, D., Miller, V., Nettles, A., Sowers, M.F., and Giordani, B. (2003). School performance, race and other correlates of sleep-disordered breathing. Sleep Medicine, 4, 21-27.

Ketterer, M. W., Huffman, J., Lumley, M. A., Wassef, S., Gray, L., Kenyon, L., Kraft, P., Brymer, J., Rhoads, K., Lovallo, W. R., & Goldberg, A. D. (1998). Five year follow-up for adverse outcomes in males with at least minimally positive angiograms: Importance of “denial” in assessing psychosocial risk factors. Journal of Psychosomatic Research, 44, 241-250.

**REVIEWS**

- 2016 Book Proposal Review for Oxford University Press.
- 2001 Book Review for Swets and Zeitlinger Publishers.
- 2008 Ad Hoc Reviewer for Aging, Neuropsychology and Cognition.

**RECENT TRAINING OPPORTUNITIES**

- 2022 **The Role of Violence Risk Assessment in Fitness for Duty Evaluations**  
Sanjay Shah, J.D., Ph.D.
- 2022 **A Strengths-Based Approach to Assessing and Writing About Distressed and Distressing Children**  
Stephanie Nelson, Ph.D.
- 2022 **TBI: A Clinical Perspective**  
Kishore Ranade, M.D.
- 2022 **The Utility of the M-FAST in the Assessment of Malingering in Forensic Settings and Emergency Departments**  
Holly Miller, Ph.D.
- 2022 **Making Reports and Feedback Sessions Helpful**  
Ramzi Hasson, Ph.D. & Crystal Young, Ph.D.
- 2022 **Don't Let the “TR” Fool You: The DSM-5-TR is Far More Than a Text Revision**  
Greg Neimeyer, Ph.D.
- 2022 **Military Cultural Competence: Providing Effective Assessment and Treatment**  
Carrie Kennedy, Ph.D.
- 2022 **Advanced Interpretation of the PAI: Distorted Profile Interpretation**  
Leslie Morey, Ph.D.
- 2022 **Developmental Pathways to Conduct Disorder: Implications of the DSM-5 Specifier “with Limited Prosocial Emotions”**  
Paul Frick, Ph.D.



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- 2022      **ASD Evaluation Best Practice Guidelines: Updates and Implementation**  
Crystal Young, Ph.D. & Kara Brooklier, Ph.D.
- 2022      **Meeting of the American Academy of Clinical Neuropsychology**
- 2022      **ASD Differential Diagnosis: Language, Learning & Behavior**  
Kara Brooklier, Ph.D. & Christy Schweitzer, M.A., CCC-SLP
- 2022      **Understanding Implicit Bias in the Mental Health Professions**  
Charmeka Newton, Ph.D. & Janeé Steele, Ph.D.
- 2022      **Diagnosing Antisocial Personality Disorder: The Important (but Sometimes Overlooked) Roles of Persistence, Pervasiveness, & Psychopathy**  
Tatiana Matlasz, Ph.D.
- 2022      **The Paradoxical Brain**  
Narinder Kapur, Ph.D.
- 2022      **An Empirical Perspective on Forensic Telepractice: How Far Have We Come and What's Next?**  
Ashley Batastini, Ph.D.
- 2022      **Get Off My Lawn—I Don't Want to Learn a New Way to Write Forensic Reports**  
Terry Kukor, Ph.D.
- 2022      **The KnowNeuropsychology Didactic Series Volume V: Weekly Didactic Series**
- 2022      **Current Conceptualization and Assessment of Somatoform Disorder**  
Kyle Boone, Ph.D.
- 2022      **The Employer's Perspective of the "Disruptive Professional"**  
Michael Heitt, Psy.D.
- 2021      **Addiction 101: The Who, What, Why and How of Addiction and its Treatment**  
Matthew Goldenberg, D.O.
- 2021      **Assessing Memory in Private Practice**  
Patrick Moran, Ph.D.
- 2021      **The Reliability of Children's Statements**  
Maggie Bruck, Ph.D.
- 2021      **Update on Diagnostic Methods Across the Aging-Mild Cognitive Impairment-Alzheimer's Disease Continuum**  
Mark Bondi, Ph.D.
- 2021      **High Risk Medications and Polypharmacy for Non-Prescribers: Problematic Medication Use in Older Adults**

**Jennifer L. Huffman**

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Alexander Sasha Rackman, M.D.

2021 **MMPI-3 Online Learning Modules**  
Yossef Ben-Porath, Ph.D.

2021 **Cannabis Use and Misuse Among Older Adults: Emerging Trends and Implications for Healthy Aging**  
Frederic Blow, Ph.D.

2021 **The KnowNeuropsychology Didactic Series Volume IV: Weekly Didactic Series**

2021 **Supporting Patient and Employee Brain Health: Top 10 Evidence-Based Strategies**  
Karen Sullivan, Ph.D.

2021 **Advances in TBI: Emerging Role of Imaging and Blood Biomarkers**  
Michael McCrea, Ph.D. & Laura Blackwell, Ph.D.

2021 **Understanding Girls with ASD**  
Erin Barkow, Ph.D.

2021 **Assessing Appropriateness and Adequacy of Addiction Treatment**  
Brian Hurley, M.D.

2021 **Advanced MMPI-A-RF Interpretation**  
Robert Archer, Ph.D.

2021 **Autism Spectrum Disorder and Common Comorbidities**  
Kara Brooklier, Ph.D. & Crystal Young, Ph.D.

2021 **Making ASD Reports & Feedback Sessions Helpful**  
Ramzi Hasson, Ph.D. & Crystal Young, Ph.D.

2021 **MMPI-A-RF Overview**  
Richard Handel, Ph.D.

2021 **The KnowNeuropsychology Didactic Series Volume III: Weekly Didactic Series**

2021 **ASD Differential Diagnosis in Young Children**  
Kara Brooklier, Ph.D. & Dana Cohen, Ph.D.

2021 **Coronavirus: Its Spike and Tail: A Discussion of the Acute and Long Term Phases of the Illness**  
Justin Porto, D.O.

2021 **Beyond ABA for ASD: Treatments that Work**  
Lori Warner, Ph.D.

2021 **Use of the MMPI-3 in Forensic Settings**  
Martin Sellbom, Ph.D.

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- 2021 **Is it ASD, Trauma, or Both?**  
Kara Brooklier, Ph.D., & Sarah Witherell, Ph.D.
- 2021 **Beyond Burnout: A Systematic Big Data Approach to Measuring and Addressing Wellness in Health Professionals**  
Dan Shapiro, Ph.D.
- 2021 **Racial/Ethnic Differences in IQ Test Scores: The Case for Environmental and Social Justice**  
Lawrence Weiss, Ph.D.
- 2021 **COVID and the Brain: What We Know from the Early Research**  
Kristin Fiano, Ph.D.
- 2021 **The Psychological Impact of COVID-19 & Living Through a Pandemic**  
Alex Rodrigues, Psy.D.
- 2021 **MHS ADHD Virtual Summit: From Research to Action**
- 2021 **Law and Mental Health: Weekly Series Through The New Mexico Counseling and Therapy Practice Board**
- 2021 **Global Impact of COVID-19: The Socioeconomic Impact**  
James Goodyear, M.D.
- 2020 **Living with HIV: Challenges and Successes in the Workplace**  
Julie Rippeth, Ph.D.
- 2020 **Cannabis and Neuropsychological Functioning Description: Cannabis and Neuropsychological Functioning: An Update on Adverse Effects in Adolescence and Beyond**  
Raul Gonzalez, Ph.D. & Derin Cobia, Ph.D.
- 2020 **How to Assess and Manage the Invisible Disability: The Etiology of Chronic Pain and Mental Illness**  
Katie Connell, Ph.D. & Bradley Helms, M.D.
- 2020 **PTSD: Best Practices in Assessment and Identification of Trauma Responses**  
Kiri Faul, Ph.D.
- 2020 **The KnowNeuropsychology Didactic Series Volume II: Weekly Didactic Series**
- 2020 **Addiction 101: The Who, What, Why and How of Addiction and Its Treatment**  
Matthew Goldenberg, D.O.
- 2020 **Law and Mental Health: Weekly Series Through The New Mexico Counseling and Therapy Practice Board**

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- 2020      **The Aging Workforce: Distinguishing Between Normal and Abnormal Signs in the Workplace**  
Jonathan DeRight, Ph.D.
- 2020      **Risk Management Considerations for Safely Reopening Neuropsychology Practice in the Era of COVID-19**  
Margaret Lanca, Ph.D. & Daniel Taube, J.D., Ph.D.
- 2020      **How to Keep Executive Function Functioning to Maximize Learning During a Pandemic: Strategies for Supporting Teachers, Parents and Students**  
Jack Naglieri, Ph.D. & Kathkeen Kryza, M.A.
- 2020      **The Why and How of Performance Validity Testing in Children & Adolescents: The Pediatric Performance Validity Test Suite**  
Cecil Reynolds, Ph.D.
- 2020      **Appropriate Use of an Interpreter During Bilingual Assessments**  
Alexander Quiros, Ph.D.
- 2020      **The Power of Resilience in Difficult Times: Guidelines for Pediatric Mental Health Professionals**  
Sam Goldstein, Ph.D.
- 2020      **The Working Parent's Guide to Balancing Work, Family, and Household Responsibilities in Times of Change**  
Amy Patunaude, Ed.S.
- 2020      **Risk Management for Teleneuropsychology**  
Munro Cullum, Ph.D., Russell Bauer, Ph.D., Karen Postal, Ph.D., & Daniel Taube, J.D., Ph.D.
- 2020      **A Primer on Responding to Concerns about Violence in the Workplace**  
Laura Guy, Ph.D.
- 2020      **Offering Parent Coaching Through Telehealth**  
Anna Dvortcsak, M.S., CCC-SLP & Brooke Ingersoll, PhD, BCBA-D
- 2020      **Teleneuropsychology (TeleNP) in Response to COVID-19**  
Rene Stolwyk, Ph.D., Dustin Hammers, Ph.D., Lana Harder, Ph.D., & Munro Cullum, Ph.D.
- 2020      **Mild Traumatic Brain Injury: Symptoms, Prognosis, and Treatment Recommendations**  
Lauren Drag, Ph.D.
- 2020      **Reefer Madness: The Impact of Legalized Marijuana on the Public Safety Hiring Process**  
Cerise Vablais, Ph.D.
- 2019      **Brain Injury and Work Tasks: Understanding Employees with TBIs at Work**  
John Wright, Ph.D.

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- 2019      **Cultural Issues to Consider in Fitness for Duty Evaluations and Independent Medical Evaluations**  
Michelle Guyton, Ph.D.
- 2019      **Update on Diagnostic Methods Across the Aging-Mild Cognitive Impairment-Alzheimer Disease Continuum**  
Mark Biondi, Ph.D.
- 2019      **Opioid Town Hall**  
Michigan State Medical Society
- 2018      **Pre-Employment Psychological Evaluations for Public Safety**  
Gary Fischler, Ph.D.
- 2018      **Using the MMPI-2-RF in Independent Medical Evaluations**  
Yossef S. Ben-Porath, Ph.D.
- 2018      **The Suicidal Employee**  
Jeff Haun, Psy.D.
- 2018      **Sexual Harassment of Women in the Workplace - Victims, Perpetrators, and Organizational Paralysis**  
Kelly Wilson, Psy.D.
- 2018      **16<sup>th</sup> Annual Meeting of the American Academy of Clinical Neuropsychology**
- 2018      **Preparing for a Maturing Workforce: Understanding How Cognition Changes Over Time**  
Kristin Fiano, Ph.D.
- 2018      **Differences Between Clinical and Forensic Evaluations**  
Glen Getz, Ph.D.
- 2018      **Human Trafficking: Making the Invisible Visible**
- 2018      **Assessing the Impact of Pain on Cognitive and Emotional Functioning in a Disability Context**  
Blake Tearnan, Ph.D.
- 2018      **Ethics: What to Know Before You Need to Know It**  
Alan Lewandowski, Ph.D. & Jack Spector, Ph.D.
- 2017      **Acceptance and Commitment Therapy (ACT): Building Lives of Meaning, Purpose, & Vitality: A Two-Day Workshop**  
James Marchman, Ph.D.

## PROFESSIONAL AFFILIATIONS

- American Psychological Association
- Michigan Psychological Association

## **Jennifer L. Huffman**

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- American Academy of Clinical Neuropsychology
- International Neuropsychological Society
- Jackson County Medical Society

### **HONORS AND AWARDS**

- International Headache Society Travel Award **2001**
- President's Exceptional Service Award, Wayne State University **2000**
- The Blue Cross and Blue Shield of Michigan Foundation Student Award Program **1999**
- Michigan Psychological Association Doctoral Dissertation Research Grant **1998**
- Graduate-Professional Scholarship **1995-2000**
- Thomas C. Rumble Fellowship **1995-1996, 1997-1998**
- Lake Superior State University Faculty Association Junior Academic Achievement Scholarship **1992-1993**
- Fletcher Distinguished Scholarship **1990-1994**
- The Metalloy Corporation Scholarship **1990-1994**
- Hudson Education Association Scholarship **1990**
- Outstanding Psychology Senior Award **1994**
- GNOSIS Honor Society **1992-1994**
- Alpha Chi National College Honor Scholarship Society **1992-1994**
- Alpha Lambda Freshman Honor Society **1990-1994**

### **RESEARCH INTERESTS**

Neuropsychology, health psychology, somatic disorders, and forensic psychology

### **REFERENCES**

Available upon request

## Exhibit B

- Test results can be used to plan treatments that use strengths to compensate for weaknesses. The results help to identify what target problems to work on and which strategies to use. For example, the results can help to plan and monitor rehabilitation or to follow the recovery of skills after a stroke or traumatic brain injury.
- Studies have shown how scores on specific tests relate to everyday functional skills, such as managing money, driving, or readiness to return to work. Your results will help your doctors understand what problems you may have in everyday life. This will help guide planning for assistance or treatment.

## What Should I Expect?

A neuropsychological evaluation usually consists of an interview and testing. During the interview, information that is important for the neuropsychologist to consider will be reviewed. You will be asked about your symptoms, medical history, medications, and other important factors. Testing involves taking paper-and-pencil or computerized tests and answering questions. The time required depends on the problem being assessed. In general, several hours are needed to assess the many skills involved in processing information. Some tests will be easy while others will be more complex. The most important thing is try your best. Bring glasses or hearing aids if you use them. Try to rest and relax before your evaluation. You will probably find testing interesting, and the detailed information that is gathered will contribute to your care.

# Clinical Neuropsychology

A Guide for Patients and Their Families

An educational pamphlet brought to you by the  
Public Interest Advisory Committee,  
Division 40 (Clinical Neuropsychology),  
American Psychological Association

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## What Is Clinical Neuropsychology?

Clinical neuropsychology is a specialty profession that focuses on brain functioning. A clinical neuropsychologist is a licensed psychologist with expertise in how behavior and skills are related to brain structures and systems. In clinical neuropsychology, brain function is evaluated by objectively testing memory and thinking skills. A very detailed assessment of abilities is done, and the pattern of strengths and weaknesses is used in important health care areas, such as diagnosis and treatment planning. The clinical neuropsychologist conducts the evaluation and makes recommendations. He or she may also provide treatment, such as cognitive rehabilitation, behavior management, or psychotherapy.

## Why Have I Been Referred?

Neuropsychological evaluations are requested specifically to help your doctors and other professionals understand how the different areas and systems of the brain are working. Testing is usually recommended when there are symptoms or complaints involving memory or thinking. This may be signaled by a change in concentration, organization, reasoning, memory, language, perception, coordination, or personality. The change may be due to any of a number of medical, neurological, psychological, or genetic causes. Testing will be helpful in understanding your specific situation.

## What Is Assessed?

A typical neuropsychological evaluation will involve assessment of the following:

- General intellect
- Higher level executive skills (e.g., sequencing, reasoning, problem solving)
- Attention and concentration
- Learning and memory
- Language
- Visual-spatial skills (e.g., perception)
- Motor and sensory skills
- Mood and personality

Some abilities may be measured in more detail than others, depending on your needs.

## How Are Test Scores Used To Understand My Specific Situation?

Your test scores will be compared to scores from people who are like you in important ways. By using database scores from large groups of healthy people for comparison, the neuropsychologist can judge whether or not your scores are normal for your age and educational background. The pattern of your own test scores will also be reviewed to estimate whether or not there has been a change in certain abilities. How you go about solving the various problems and answering questions during the examination will also be noted. Using these methods, your strengths and weaknesses can be identified.

## What Will the Results Tell Me?

Test results can be used to understand your situation in a number of ways.

- Testing can identify weaknesses in specific areas. It is very sensitive to mild memory and thinking problems that might not be obvious in other ways. When problems are very mild, testing may be the only way to detect them. For example, testing can help determine whether memory changes are normal age-related changes or if they reflect a neurological disorder. Testing might also be used to identify problems related to medical conditions that can affect memory and thinking, such as diabetes, metabolic or infectious diseases, or alcoholism.
- Test results can also be used to help differentiate among illnesses, which is important because appropriate treatment depends on accurate diagnosis. Different illnesses result in different patterns of strengths and weaknesses on testing. Therefore, the results can be helpful in determining which areas of the brain might be involved and what illness might be operating. For instance, testing can help to differentiate among Alzheimer's disease, stroke, and depression. Your physician will use this information along with the results of other tests, such as brain imaging and blood tests, to come to the most informed diagnosis possible.
- Sometimes testing is used to establish a "baseline," or document a person's skills before there is any problem. In this way, later changes can be measured very objectively.

## Exhibit C

## What Should I Expect?

A neuropsychological evaluation usually includes an interview with parents about the child's history, observation of and interview with the child, and testing. Testing involves paper and pencil and hands-on activities, answering questions, and sometimes using a computer. Parents may be asked to fill out questionnaires about their child's development and behavior. Many neuropsychologists employ trained examiners, or technicians, to assist with the administration and scoring of tests, so your child may see more than one person during the evaluation. Parents are usually not in the room during testing, although they may be present with very young children. The time required depends on the child's age and problem. Make sure your child has a good night's sleep before the testing. If your child wears glasses or a hearing aid or any other device, make sure to bring it. If your child has special language needs, please alert the neuropsychologist to these. If your child is on stimulant medication, such as Ritalin, or other medication, check with the neuropsychologist beforehand about coordinating dosage time with testing. If your child has had previous school testing, an individual educational plan, or has related medical records, please bring or send this information and records to the neuropsychologist for review.

What you tell your child about this evaluation depends on how much he or she can understand. Be simple and brief and relate your explanation to a problem that your child knows about such as "trouble with spelling," "problems following directions," or "feeling upset." Reassure a worried child that testing involves no "shots." Tell your child that you are trying to understand his or her problem to make things better. You may also tell the child that "nobody gets every question right," and that the important thing is to "try your best." Your child will probably find the neuropsychological evaluation interesting, and the detailed information that is gathered will contribute to your child's care.

# Pediatric Neuropsychology

A Guide for Parents

An educational pamphlet brought to you by  
the Public Interest Advisory Committee,  
Division 40 (Clinical Neuropsychology),  
American Psychological Association

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## What Is Pediatric Neuropsychology?

Pediatric neuropsychology is a professional specialty concerned with learning and behavior in relationship to a child's brain. A pediatric neuropsychologist is a licensed psychologist with expertise in how learning and behavior are associated with the development of brain structures and systems. Formal testing of abilities such as memory and language skills assesses brain functioning. The pediatric neuropsychologist conducts the evaluation, interprets the test results, and makes recommendations. The neuropsychologist may work in many different settings and may have different roles in the care of your child. Sometimes, the pediatric neuropsychologist is a case manager who follows the child over time to adjust recommendations to the child's changing needs. He or she may also provide treatment, such as cognitive rehabilitation, behavior management, or psychotherapy. Often, the neuropsychologist will work closely with a physician to manage the child's problems. Some pediatric neuropsychologists work closely with schools to help them provide appropriate educational programs for the child.

## How Does a Neuropsychological Evaluation Differ From a School Psychological Assessment?

School assessments are usually performed to determine whether a child qualifies for special education programs or therapies to enhance school performance. They focus on achievement and skills needed for academic success. Generally, they do not diagnose learning or behavior disorders caused by altered brain function or development.

## Why Are Children Referred for Neuropsychological Assessment?

Children are referred by a doctor, teacher, school psychologist, or other professional because of one or more problems, such as:

- Difficulty in learning, attention, behavior, socialization, or emotional control;
- A disease or inborn developmental problem that affects the brain in some way; or
- A brain injury from an accident, birth trauma, or other physical stress.

A neuropsychological evaluation assists in better understanding your child's functioning in areas such as memory, attention, perception, coordination, language, and personality. This information will help you and your child's teacher, therapists, and physician provide treatments and interventions for your child that will meet his or her unique needs.

## What Is Assessed?

A typical neuropsychological evaluation of a school-age child may assess these areas:

- General intellect
- Achievement skills, such as reading and math
- Executive skills, such as organization, planning, inhibition, and flexibility
- Attention
- Learning and memory
- Language
- Visual-spatial skills
- Motor coordination
- Behavioral and emotional functioning
- Social skills

Some abilities may be measured in more detail than others, depending on the child's needs. A detailed developmental history and data from the child's teacher may also be obtained. Observing your child to understand his or her motivation, cooperation, and behavior is a very important part of the evaluation.

Emerging skills can be assessed in very young children. However, the evaluation of infants and preschool children is usually shorter in duration, because the child has not yet developed many skills.

## What Will the Results Tell Me About My Child?

By comparing your child's test scores to scores of children of similar ages, the neuropsychologist can create a profile of your child's strengths and weaknesses. The results help those involved in your child's care in a number of ways.

- Testing can explain why your child is having school problems. For example, a child may have difficulty reading because of an attention problem, a language disorder, an auditory processing problem, or a reading disability. Testing also guides the pediatric neuropsychologist's design of interventions to draw upon your child's strengths. The results identify what skills to work on, as well as which strategies to use to help your child.
- Testing can help detect the effects of developmental, neurological, and medical problems, such as epilepsy, autism, attention deficit hyperactivity disorder (ADHD), dyslexia, or a genetic disorder. Testing may be done to obtain a baseline against which to measure the outcome of treatment or the child's development over time.
- Different childhood disorders result in specific patterns of strengths and weaknesses. These profiles of abilities can help identify a child's disorder and the brain areas that are involved. For example, testing can help differentiate between an attention deficit and depression or determine whether a language delay is due to a problem in producing speech, understanding or expressing language, social shyness, autism, or cognitive delay. Your neuropsychologist may work with your physician to combine results from medical tests, such as brain imaging or blood tests, to diagnose your child's problem.
- Most importantly, testing provides a better understanding of the child's behavior and learning in school, at home, and in the community. The evaluation can guide teachers, therapists, and you to better help your child achieve his or her potential.

## Exhibit D

**HUFFMAN PSYCHOLOGY, PLLC**Jennifer L. Huffman, Ph.D., ABPP-CN and Associates  
Clinical Psychology and Neuropsychology Services**ADULT HISTORY FORM**

For Office Use Only: Interview held on \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_ with \_\_\_\_\_

**Instructions:** Please answer all of the following questions to the best of your ability.

Notes

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Address: \_\_\_\_\_ Date of birth: \_\_\_\_\_ Age: \_\_\_\_\_  
 Sex: ☐ Male ☐ Female ☐ Other  
 Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_  
 Cell phone/other phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Handedness: ☐ right handed ☐ left handed ☐ both (explain): \_\_\_\_\_  
 Highest grade completed: \_\_\_\_\_ Area of study: \_\_\_\_\_  
 Primary care physician, address, and phone: \_\_\_\_\_

Name of person completing form: \_\_\_\_\_ Relationship to patient: \_\_\_\_\_

**REFERRAL INFORMATION:**

Who referred you for an evaluation/psychological services? \_\_\_\_\_

What are you hoping to learn from this evaluation/psychological services? \_\_\_\_\_

Current Symptoms: \_\_\_\_\_

Lab Findings: \_\_\_\_\_

Overall, my symptoms have developed: ☐ Slowly ☐ Quickly**EARLY HISTORY:**1) Were you born: ☐ On time ☐ Prematurely ☐ Late

2) Birth weight: \_\_\_\_\_

3) Were there any problems associated with:

your mother's pregnancy (describe) \_\_\_\_\_

your birth (e.g., oxygen deprivation, unusual birth position, etc.) \_\_\_\_\_

the period immediately after birth (e.g., need for oxygen, special equipment used, convulsions, illness, etc.) \_\_\_\_\_

4) Rate your developmental progress to the best of your knowledge:

	Early	Average	Late
Walking	_____	_____ (10-16 mos.)	_____
Language	_____	_____ (12-24 mos.)	_____
Toilet training	_____	_____ (18-36 mos.)	_____

5) As a child, did you have any of these conditions? (Check all that apply):

<input type="checkbox"/> Frequent ear infections	<input type="checkbox"/> Head injury	<input type="checkbox"/> Behavioral problems
<input type="checkbox"/> Clumsiness	<input type="checkbox"/> Hearing problems	<input type="checkbox"/> Speech problems
<input type="checkbox"/> Developmental delay	<input type="checkbox"/> Hyperactivity	<input type="checkbox"/> Vision problems
<input type="checkbox"/> Attention problems	<input type="checkbox"/> Learning disability	<input type="checkbox"/> Psychological problems

Other problems: \_\_\_\_\_



**MEDICAL HISTORY:**

Medical illnesses as a child: \_\_\_\_\_

\_\_\_\_\_

Medical illnesses as an adult: \_\_\_\_\_

\_\_\_\_\_

[LOC FEB SZ TOX SENS BAL/GT ]

Do you have hearing problems? ☐ Yes ☐ No Vision Problems? ☐ Yes ☐ NoHave you ever suffered an injury to your head? ☐ Yes ☐ No

When? Year: \_\_\_\_\_ Your age: \_\_\_\_\_

If yes, explain the circumstances and any problems you had afterwards:

\_\_\_\_\_

\_\_\_\_\_

Describe your recent mood: \_\_\_\_\_

Have you been involved in psychological or psychiatric treatment? ☐ Yes ☐ No

With whom? \_\_\_\_\_ When? \_\_\_\_\_

Who suggested the treatment? \_\_\_\_\_

For what were you treated? \_\_\_\_\_

[SI/HI AH/VH ]

**ALCOHOL INTAKE:**My last drink was: ☐ less than 24 hours ago ☐ 24-48 hours ago ☐ over 48 hours ago

\_\_\_\_\_ Beverages per week/month

\_\_\_\_\_ % drink to intoxication

Period of heavy drinking: Years: \_\_\_\_\_

\_\_\_\_\_ Beverages per week/month \_\_\_\_\_ % drink to intoxication

**NICOTINE/MARIJUANA/DRUG INTAKE:**Do you have a history of tobacco/nicotine use? ☐ Yes ☐ No Current User? ☐ Yes ☐ No

Type of tobacco/nicotine used: \_\_\_\_\_ Amount/Number per day: \_\_\_\_\_

Do you have a history of marijuana/THC or illicit substance use? ☐ Yes ☐ No

Type/s of drug used: \_\_\_\_\_

Frequency of use: \_\_\_\_\_

**SLEEP/APPETITE/SEXUAL INTEREST/EXERCISE:**

Describe your recent sleep: \_\_\_\_\_

Insomnia: ☐ Early Phase ☐ Middle Phase ☐ Late Phase

Describe your recent appetite: \_\_\_\_\_ Recent weight loss/weight gain? \_\_\_\_\_

Have there been any recent changes in your sexual interest? \_\_\_\_\_

Describe your exercise routine: \_\_\_\_\_

Please list any medications, vitamins, or supplements you are currently taking (over-the-counter or prescription medication, and the schedule and dosage, if known):

- a) \_\_\_\_\_
- b) \_\_\_\_\_
- c) \_\_\_\_\_
- d) \_\_\_\_\_
- e) \_\_\_\_\_
- f) \_\_\_\_\_
- g) \_\_\_\_\_
- h) \_\_\_\_\_
- i) \_\_\_\_\_
- j) \_\_\_\_\_

### **FAMILY HISTORY:**

Where were you born? \_\_\_\_\_

Where were you raised? \_\_\_\_\_ Until what year? \_\_\_\_\_

How many siblings do you have, and what medical/learning conditions have they experienced?

Name	Gender	Age	Conditions

Describe any medical or psychological conditions that run in your family (and in what family member):

[PD                  HD                  AD                  Scz                  Ep                  MS                  LU    ]

Do you live alone or with others? (if with others, whom?): \_\_\_\_\_

Current marital status: ☐ Married      ☐ Single      ☐ Divorced      ☐ Widowed      ☐ Separated

Number of children: \_\_\_\_\_

**ACTIVITIES OF DAILY LIVING:** Describe any problems completing normal activities of living: \_\_\_\_\_

**HOBBIES:** \_\_\_\_\_

### **DRIVING:**

Do you hold a valid driver's license? ☐ Yes    ☐ No    Do you currently drive? ☐ Yes    ☐ No

Have you been involved in any car accidents? ☐ Yes    ☐ No

Explain: \_\_\_\_\_



**LEGAL:** Do you have a history of past or current legal involvement? ☐ Yes ☐ No

Explain: \_\_\_\_\_

**EDUCATIONAL HISTORY:**

High Sch: Yr. Graduated \_\_\_\_\_ Location: \_\_\_\_\_

College: Yr. Graduated \_\_\_\_\_ Location: \_\_\_\_\_ Disc.: \_\_\_\_\_

Yr. Graduated \_\_\_\_\_ Location: \_\_\_\_\_ Disc.: \_\_\_\_\_

Yr. Graduated \_\_\_\_\_ Location: \_\_\_\_\_ Disc.: \_\_\_\_\_

Graduate: Yr. Graduated \_\_\_\_\_ Location: \_\_\_\_\_ Disc.: \_\_\_\_\_

Yr. Graduated \_\_\_\_\_ Location: \_\_\_\_\_ Disc.: \_\_\_\_\_

1) Describe your usual performance as a student:

☐ A&B ☐ B&C ☐ C&D ☐ D&F

Please provide any additional helpful comments about your academic performance:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2) What was your strongest subject(s)? \_\_\_\_\_

3) What was your weakest subject(s)? \_\_\_\_\_

Please **rate** your abilities in the following (excellent, poor, fair, etc.):

Spelling \_\_\_\_\_ Reading \_\_\_\_\_ Arithmetic \_\_\_\_\_

4) Did you ever repeat a grade?

If yes, what grade(s)? \_\_\_\_\_ and reason? \_\_\_\_\_

5) Were you ever in any special class(es) or did you receive special services for learning difficulties? \_\_\_\_\_

6) Have you ever had an evaluation before today? \_\_\_\_\_

**MILITARY HISTORY:**

Have you served in the military? ☐ Yes ☐ No If yes, what branch? \_\_\_\_\_

Years served: \_\_\_\_\_ Highest rank earned: \_\_\_\_\_

Type of discharge: \_\_\_\_\_

**OCCUPATIONAL HISTORY:**

1) Job title of patient (if working): \_\_\_\_\_ Year Retired: \_\_\_\_\_

School attending (if student): \_\_\_\_\_ Major: \_\_\_\_\_

2) How long have you been at your current job? \_\_\_\_\_

Past Jobs:

Position: \_\_\_\_\_ Years: \_\_\_\_\_

Position: \_\_\_\_\_ Years: \_\_\_\_\_

Position: \_\_\_\_\_ Years: \_\_\_\_\_

Position: \_\_\_\_\_ Years: \_\_\_\_\_

Position: \_\_\_\_\_ Years: \_\_\_\_\_

Position: \_\_\_\_\_ Years: \_\_\_\_\_

## Exhibit E

**HUFFMAN PSYCHOLOGY, PLLC**Jennifer L. Huffman, Ph.D., ABPP-CN and Associates  
Clinical Psychology and Neuropsychology Services**CHILD HISTORY FORM**

For Office Use Only: Interview held on \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_ with \_\_\_\_\_

**Instructions:** Please answer all of the following questions to the best of your ability.

Notes

Child's name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Address: \_\_\_\_\_ Date of birth: \_\_\_\_\_ Age: \_\_\_\_\_  
 Sex: ☐ Male ☐ Female ☐ Other  
 Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_  
 Cell phone/other phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Name of person completing form: \_\_\_\_\_ Relationship to child: \_\_\_\_\_  
 Child's primary care physician, address, and phone: \_\_\_\_\_

**Referral Information**

Who referred you for an evaluation/psychological services? \_\_\_\_\_

What are you hoping to gain from these services? \_\_\_\_\_

In your opinion, what is the major cause of this child's difficulties? \_\_\_\_\_

Describe some of this child's strengths: \_\_\_\_\_

Describe some of this child's weaknesses: \_\_\_\_\_

Do caregivers agree about the nature and causes of the problem? \_\_\_\_\_

**Pregnancy and Birth History**Child is: ☐ biological ☐ adopted (at age \_\_\_\_\_) ☐ fosterWas this child a planned pregnancy? ☐ No ☐ YesWas the mother under a doctor's care? ☐ No ☐ Yes

Number of previous pregnancies: \_\_\_\_\_ miscarriages: \_\_\_\_\_

Check any of the following health complications during the pregnancy.

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Fertility problems              | <input type="checkbox"/> Vaginal bleeding     | <input type="checkbox"/> Toxemia              |
| <input type="checkbox"/> High blood pressure             | <input type="checkbox"/> Gestational diabetes | <input type="checkbox"/> Trauma               |
| <input type="checkbox"/> Fever/rash (e.g., flu, measles) | <input type="checkbox"/> Emotional problems   | <input type="checkbox"/> Abnormal weight gain |
| <input type="checkbox"/> Anemia                          | <input type="checkbox"/> Excessive swelling   | <input type="checkbox"/> Excessive vomiting   |
| <input type="checkbox"/> Blood incompatibility           | <input type="checkbox"/> Smoking              | <input type="checkbox"/> Alcohol              |
| <input type="checkbox"/> Illicit drugs                   | <input type="checkbox"/> Medications          | <input type="checkbox"/> Other: _____         |

☐ Hospitalization during pregnancy: Reason: \_\_\_\_\_☐ X-rays during pregnancy: What month? \_\_\_\_\_

List any medications, tobacco use, alcohol use, or other drugs during pregnancy: \_\_\_\_\_



Age of mother: \_\_\_\_\_ and father: \_\_\_\_\_ at delivery      Age of mother at birth of first child: \_\_\_\_\_  
 Birth weight: \_\_\_\_\_ lbs. \_\_\_\_\_ oz.      Length of pregnancy: \_\_\_\_\_ weeks  
 Length of labor: \_\_\_\_\_ hours      Apgar scores: \_\_\_\_\_  
 Delivery was: ☐ vaginal    ☐ Cesarean (reason \_\_\_\_\_)

*Check any of the following complications during birth.*

☐ Breech birth                      ☐ Cord around neck                      ☐ Meconium staining  
☐ Lacking oxygen                      ☐ Forceps used                      ☐ Labor induced  
☐ Other: Describe: \_\_\_\_\_  
☐ Jaundiced: Bilirubin lights?    ☐ No    ☐ Yes    If yes, how long? \_\_\_\_\_  
 Did baby breathe spontaneously? ☐ No    ☐ Yes    Oxygen required? ☐ No    ☐ Yes  
 Length of stay in hospital: Mother: \_\_\_\_\_ days    Child: \_\_\_\_\_ days  
 Medical problems after discharge (e.g., jaundice, fever, transfusion, surgery)? \_\_\_\_\_

Any problems in first few months? ☐ No    ☐ Yes    Explain: \_\_\_\_\_  
 Did mother experience postpartum (after birth) depression? ☐ No    ☐ Yes  
 Describe this child's temperament as an infant: \_\_\_\_\_

## **Developmental History**

### *Motor*

Age sat alone: \_\_\_\_\_ crawled: \_\_\_\_\_ stood alone: \_\_\_\_\_ walked alone: \_\_\_\_\_  
 Was this child slow to develop motor skills or awkward compared to siblings/friends (e.g., running, skipping, climbing, playing ball, handwriting)? \_\_\_\_\_  
 Handedness: ☐ right    ☐ left    ☐ both (explain) \_\_\_\_\_  
☐ History of physical therapy? When? \_\_\_\_\_  
☐ History of occupational therapy? When? \_\_\_\_\_

### *Speech/Language*

Age spoke first word: \_\_\_\_\_ put 2-3 words together: \_\_\_\_\_ spoke in sentences: \_\_\_\_\_  
☐ Oral motor problems (e.g., late drooling, poor sucking, poor chewing)? Describe: \_\_\_\_\_  
☐ Speech delay/problems (e.g., stutters, difficult to understand)? \_\_\_\_\_  
☐ History of speech/language therapy? When? \_\_\_\_\_  
 Was this child slow to: ☐ learn alphabet?    ☐ name colors?    ☐ count?  
☐ Other language spoken in home (besides English)? \_\_\_\_\_

### *Toileting*

Age when toilet trained: \_\_\_\_\_  
☐ Problems with bed wetting? Until what age? \_\_\_\_\_  
☐ Urine accidents? Until what age? \_\_\_\_\_  
☐ Soiling accidents? Until what age? \_\_\_\_\_  
☐ Current wetting or soiling problems? Explain: \_\_\_\_\_

How old was this child when you first became concerned about his/her social/emotional/behavioral functioning? \_\_\_\_\_

**Medical History***Check any that apply and indicate age.*

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Failure to thrive       | <input type="checkbox"/> Febrile seizures        | <input type="checkbox"/> Epilepsy              |
| <input type="checkbox"/> Staring spells          | <input type="checkbox"/> Lead poisoning          | <input type="checkbox"/> Toxic ingestion       |
| <input type="checkbox"/> Meningitis              | <input type="checkbox"/> Encephalitis            | <input type="checkbox"/> Asthma                |
| <input type="checkbox"/> Allergies               | <input type="checkbox"/> Diabetes                | <input type="checkbox"/> Loss of consciousness |
| <input type="checkbox"/> Stomach pain            | <input type="checkbox"/> Vomiting                | <input type="checkbox"/> Headaches             |
| <input type="checkbox"/> Constipation            | <input type="checkbox"/> Urination problems      | <input type="checkbox"/> Accident prone        |
| <input type="checkbox"/> Frequent ear infections | <input type="checkbox"/> Sleep problems          | <input type="checkbox"/> Eating problems       |
| <input type="checkbox"/> Tics/twitching          | <input type="checkbox"/> Repetitive movements    | <input type="checkbox"/> Impulsivity           |
| <input type="checkbox"/> Temper tantrums         | <input type="checkbox"/> Nail biting             | <input type="checkbox"/> Clumsiness            |
| <input type="checkbox"/> Head banging            | <input type="checkbox"/> Self-injurious behavior | <input type="checkbox"/> Rocks back and forth  |

Has vision been checked? ☐ No ☐ Yes Any problems? \_\_\_\_\_

Has hearing been checked? ☐ No ☐ Yes Any problems? \_\_\_\_\_

History of ear tubes? ☐ No ☐ Yes

*List serious illnesses/injuries/hospitalizations/surgeries.*

Incident (explain)	Age
_____	_____
_____	_____
_____	_____

*Check if any of the following have been performed (list dates).*

☐ CT \_\_\_\_\_ ☐ MRI \_\_\_\_\_ ☐ EEG \_\_\_\_\_

List results of these or other tests: \_\_\_\_\_

Describe head injuries (e.g., date, type, loss of consciousness, associated symptoms): \_\_\_\_\_

Current medications/supplements and reasons: \_\_\_\_\_

Is there a family history of (list problems and relationships of family members):

learning or attention problems? \_\_\_\_\_

psychiatric problems (e.g., depression, anxiety, schizophrenia, other mental illness)? \_\_\_\_\_

alcoholism or substance abuse? \_\_\_\_\_

autism spectrum disorder or intellectual disability? \_\_\_\_\_

neurological illness (e.g., Alzheimer's disease, Huntington's chorea, Parkinson's disease, epilepsy)? \_\_\_\_\_

other medical illness (e.g., high blood pressure, cancer, diabetes, migraine headaches, heart disease)? \_\_\_\_\_

Does anyone else in the family have a problem similar to this child's reason for referral? \_\_\_\_\_

### Family Information

Parent/Caregiver name: \_\_\_\_\_ age: \_\_\_\_\_ education: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Parent/Caregiver name: \_\_\_\_\_ age: \_\_\_\_\_ education: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Parents are: ☐ married ☐ separated ☐ divorced ☐ never married

Describe the nature of the current relationship between the parents (e.g., loving, friendly, civil, conflictual, volatile): \_\_\_\_\_

Do the parents generally agree on child rearing strategies (e.g., discipline)? ☐ No ☐ Yes

Is this child closer to one parent than another? ☐ No ☐ Yes If yes, which? \_\_\_\_\_

If divorced, who has custody of this child? \_\_\_\_\_

Describe the visitation arrangements: \_\_\_\_\_

List all brothers and sisters, and any other members of the household(s).

Age	Sex	Name/relationship to this child	Living at home?	Problems?
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Is this child in a child-care setting? ☐ No ☐ Yes How many hours/day? \_\_\_\_\_

Has this child ever experienced death or separation from a loved one? ☐ No ☐ Yes

Explain: \_\_\_\_\_

### Social History

Does this child:

- |  |                             |                              |
|--|-----------------------------|------------------------------|
| have difficulty relating to or playing with other children?      | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| interact better with adults than children his/her own age?       | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| have difficulty making/keeping friends?                          | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| understand gestures?   | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| have a good sense of humor?                                      | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| understand social cues well (e.g., knows when others are angry)? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| have problems with peer pressure (e.g., alcohol or drug use)?    | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| show a desire to please you?                                     | <input type="checkbox"/> No | <input type="checkbox"/> Yes |

### Adaptive Functioning

Please list any chores or responsibilities this child has at home: \_\_\_\_\_

Describe screen media use: \_\_\_\_\_

### Psychological History

Please describe this child's typical mood: \_\_\_\_\_

*List any previous direct contact with any social agency, psychologist, or psychiatrist.*

Name and type of professional	Reason for services	Dates

## Academic History

Current school and address: \_\_\_\_\_

Grade: \_\_\_\_\_ Placement: ☐ regular ☐ resource ☐ special education ☐ other

Any grades that were skipped or repeated? ☐ No ☐ Yes Explain: \_\_\_\_\_

*Check any of the following teachers have reported problems in.*

<input type="checkbox"/> Reading	<input type="checkbox"/> Attention/concentration
<input type="checkbox"/> Spelling	<input type="checkbox"/> Behavior
<input type="checkbox"/> Arithmetic	<input type="checkbox"/> Social adjustment
<input type="checkbox"/> Writing	

*Describe any academic problems.*

Preschool \_\_\_\_\_

Kindergarten \_\_\_\_\_

Early elementary school (1<sup>st</sup> to 2<sup>nd</sup>) \_\_\_\_\_

Upper elementary school (3<sup>rd</sup> to 5<sup>th</sup>) \_\_\_\_\_

Middle school (6<sup>th</sup> to 8<sup>th</sup>)

High school \_\_\_\_\_

Has this child been tested for special education? ☐ No ☐ Yes Results: \_\_\_\_\_

Does this child have an IEP? ☐ No ☐ Yes If so, describe services: \_\_\_\_\_

### Additional Comments

[illegible]